

Tylenol® vs. Motrin®/Advil®: The Great Debate

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Often I am asked the question, “Which product is best, Tylenol®, Motrin®, or Advil® for my child’s fever?” This question requires additional pieces of information before it can be answered adequately.

First, how old is your child? If your child is less than 2 months of age and has a fever (rectal temperature of 100.4°F or above), then you should take him or her to the emergency room immediately. If your child is between the ages of 2 and 3 months and has a rectal temperature greater than 101° F, has a rectal temperature greater than 104° F regardless of age, or has had a fever for three or more days, then you should call your pediatrician immediately. He or she will advise you about whether to give your child something to reduce the fever, bring you child to the emergency room, or both.

Secondly, does your child have a medical history that includes asthma, heart, kidney, or liver disease, gastrointestinal bleed (coffee ground stool), or ulcers? If so, you should avoid giving ibuprofen products such as Motrin® and Advil® to your child unless it is given under the direction of your pediatrician. Likewise, acetaminophen (Tylenol®) should be used under the direction of your pediatrician if your child has liver disease.

Lastly, what other medications (both prescription and over-the-counter) is your child taking? It is important to remember that both acetaminophen and ibuprofen are included in many over-the-counter and prescription products. If you do not know whether your child’s medications contain acetaminophen and/or ibuprofen, you should ask your pediatrician or pharmacist. Over-the-counter products will have the active ingredients listed on the back of the product label.

Now back to the question, “Which product is “best?” Within certain limitations, the best product is the product that works best for *your* child. It has been said that ibuprofen is better than acetaminophen because it works faster and lasts longer; however, it has also been said that there is no difference between the two products. Medical literature supports both arguments.

Since ibuprofen should not be used in children less than six months of age, I generally recommend using acetaminophen as the first line agent to treat fever in children. If acetaminophen is not effective and the patient is older than six months of age, then I would switch him or her to ibuprofen. I do not recommend alternating acetaminophen and ibuprofen. There is evidence that this combination could lead to accidental overdoses caused by the two different dosing intervals (every 4 to 6 hours for acetaminophen vs. every 6 to 8 hours for ibuprofen). If it is your pediatrician’s desire that your child receive acetaminophen and ibuprofen on an alternating schedule, ask for a schedule.

As I mentioned earlier, both acetaminophen and ibuprofen are found in many prescription and over-the-counter drug products. In addition, they are found in multiple strengths and formulations. It is very important to be familiar with the product that you are using prior to giving the medication to your child. For example, acetaminophen is available as a liquid and as a concentrated drop. One teaspoonful of the liquid is equivalent to 160 mg of acetaminophen; whereas, one teaspoonful of the concentrated drops is equivalent to 500 mg of acetaminophen. If a child were to receive the volume

of concentrated drops that should be given as the liquid, he or she would have received more than three times the recommended dose. Verify all doses and volumes of these doses with your pediatrician and/or pharmacist. As a reminder, aspirin should not be used in children or adolescents except under the direction of a pediatrician.

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